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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/579,369			ing Date 15/2006	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2) SMALL ENTIT											HER THAN
⊢	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	\neg	N/A		N/A	ı	N/A	122(0)	l	N/A	TLL (0)
	SEARCH FEE		N/A		N/A	1	N/A		ı	N/A	
	(37 CFR 1.16(k), (j), (EXAMINATION FE (37 CFR 1.16(o), (p), (p)	E	N/A		N/A	ı	N/A		١	N/A	
	FAL CLAIMS CFR 1.16(i))	01 (4))	minus 20 =				x \$ =		OR	x s =	
IND	EPENDENT CLAIM CFR 1,16(h))	s	minus 3 = *			ı	x \$ =			x \$ =	
	APPLICATION SIZE 37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and drawing sheets of paper, the application is \$250 (\$125 for small entity) additional 50 sheets or fraction 35 U.S.C. 41(a)(1)(G) and 37 (n size fee due for each n thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))											
* If	he difference in colu	r "0" in column 2.		TOTAL		ı	TOTAL				
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY											
AMENDMENT	08/12/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16())	• 94	Minus	 59	= 35		X \$26 =	910	OR	x s =	
	Independent (37 CFR 1.16(h))	• 3	Minus	 4	= 0	ı	X \$110 =	0	OR	x s =	
	Application Size Fee (37 CFR 1.16(s))										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
								910	OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16(i))		Minus	**		l	x \$ =		OR	x \$ =	
M	Independent (37 CFR 1.16(h))		Minus	***		1	x \$ =		OR	x \$ =	
Ш	Application Size Fee (37 CFR 1.16(s))]			ı		
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					ı			OR		
•							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write 0" in column 3. If the "Highest Number Prevously Paid For IN THIS SPACE is less than 80, enter "20". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 10, enter "20". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 10, enter "20". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 10, enter "20". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 10, enter "20". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Prevously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Numb											

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